

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail Stop ISSUE FEE**  
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**Alexandria, Virginia 22313-1450**  
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CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections on the Block 1)

23556 7590 07/22/2003

KIMBERLY-CLARK WORLDWIDE, INC.  
 401 NORTH LAKE STREET  
 NEENAH, WI 54956



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Judy Garop (Depositor's name)  
 Judy Garop (Signature)  
 October 13, 2003 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/015,838	11/02/2001	Mark Alan Burazin	14,923A	8510

TITLE OF INVENTION: FABRIC FOR USE IN THE MANUFACTURE OF TISSUE PRODUCTS HAVING VISUALLY DISCERNABLE BACKGROUND TEXTURE REGIONS BORDERED BY CURVILINEAR DECORATIVE ELEMENTS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1300	\$300	\$1600	10/22/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
HUG, ERIC J	1731	162-362000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Patricia A. Charlier  
 2  
 3

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE: Kimberly-Clark Worldwide, Inc. (B) RESIDENCE (CITY AND STATE OR COUNTRY): 401 N. Lake St., Neenah, WI 54956

Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee

☒ Publication Fee

☒ Advance Order - # of Copies 1

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(Date)

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10/15/2003 AHONDAF2 00000094 110875 10015838

01 FC:1501 1330.00 DA  
 02 FC:1504 300.00 DA  
 03 FC:8001 3.00 DA

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PTOL-85 (REV. 05-03) Approved for use through 04/30/2004. OMB 0651-0033

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

**Kimberly-Clark**

Facsimile

K-C North  
401 North Lake Street  
Neenah, Wisconsin 54956

<b>To:</b>	<b>Name</b> BOX ISSUE FEE	<b>Company</b> U.S.P.T.O.	<b>Fax Number</b> (703) 746-4000
<b>Subject:</b>	U.S.S.N. 10/015,838 Attorney Docket: 14,923A		
<b>From:</b>	Patricia A. Charlier		<b>Page:</b> 1 of 2
<b>Dept:</b>	Legal		<b>Date:</b> 10/13/03
<b>Loc:</b>	K-C North		<b>Time:</b> 3:25 p.m.

Transmitted herewith is PTOL-85 - Issue Fee Transmittal.

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I HEREBY CERTIFY THAT THIS PAPER IS BEING  
FACSIMILE TRANSMITTED TO THE PATENT AND  
TRADEMARK OFFICE ON THE DATE SHOWN BELOW.

JUDY GAROT

TYPE OR PRINT NAME OF PERSON SIGNING CERTIFICATE

Judy Garot      10/13/03  
SIGNATURE      DATE

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